

Child and Family Services



June 2007

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This newsletter, specific staff contact information for OCFS staff, and other important information is available on the Office of Child and Family Services webpage at:
<http://www.dmhmrzas.virginia.gov/CFS-default.htm>



Message Regarding the Virginia Tech Tragedy from Commissioner Reinhard

All of us at the Department of Mental Health, Mental Retardation and Substance Abuse Services join our fellow Virginians and all Americans in expressing profound sadness over the tragedy at Virginia Tech. The loss is stunning.

As we grieve, the Department is also working closely with the Governor's Office to ensure a well-coordinated immediate response. We thank the staff at New River Valley Community Services Board for their work with Virginia Tech, the local Red Cross, and the Virginia Department of Health in responding to the immediate crisis counseling needs of those impacted by the tragedy.

Additionally, we extend our appreciation to the Blue Ridge Behavioral Health Authority and other CSBs for support and assistance in their locality. We are especially grateful for the continuing offers of help from our sister agencies in Virginia, from our public and private partners, and from mental health authorities in many states.

DMHMRSAS is taking significant action steps to mobilize the mental health services that will be needed in the future, not only in Blacksburg, but also throughout the Commonwealth. The Department will continue to work with the state leadership, and will evaluate the need for accessing additional resources that may be available through the [Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#).

* * *

As a result of the Virginia Tech shooting tragedy on April 16, 2007 Governor Timothy Kaine has appointed a Blue-Ribbon Commission to make recommendations for change to prevent and avoid future tragedies of this nature. The newly convened commission has been tasked with studying

potential service system improvements in the areas of inpatient and outpatient commitment and numerous other potential reforms. Training of emergency health service providers will be among the issues considered.

Minority Mental Health Study

The Joint Commission on Health Care has resumed the minority mental health study that was initially started in 2005. The study will focus on the following goals:

- determine demographic information about the use of mental health services by racial and ethnic groups in Virginia,
- examine strategies to reduce stigma and encouragement treatment,
- assess cultural competence among mental health care providers, and
- address workforce issues relevant to mental health and culture

The Commission has asked that the Department provide relevant demographic data on the issues identified above. A final report will be presented at the Commissioner's September meeting.

Mental Health Law Reform- Taskforce on Children and Adolescents

The Child and Adolescent taskforce's subcommittees continue to meet regularly. Reports by each subcommittee will be submitted to the Commission with options including the pros and cons of each option. The Commission will then choose the options, conduct a fiscal impact study, and make final recommendations to the Administration on the options that should be considered for implementation. As the subcommittees continue their work and collect accurate information; options will continue to be revised to reflect information reviewed and analyzed. The following options have been identified for the Child and Adolescent taskforce subcommittees:

Services and Custody Relinquishment

- Follow the work being done around the OAG's opinion and subsequent OCS

correspondence on the Foster Care Prevention Policy memoranda dated 3/27 and 5/18 requiring localities to immediately begin implementing the policy that children with mental health needs access services without families having to give up custody;

- Investigate and recommend a mandate for additional services beyond emergency services and case management for children;
- Examine the statutory framework and effectiveness of CSA; and,
- Examine money following the child options.

Involuntary Commitment:

- Examine the statute requiring hearings to take the place where the child resides,
- Extend the 72 hour timeline for cases involving weekend or holiday admissions, and
- Provide training to the individuals who do temporary detention orders.

Juvenile Justice:

- Provide training to intake officers on recognizing mental and emotional disorders in children,
- Provide emergency mental health services on a 24 hour basis for referral and intervention, and
- Implement the MH transition plan

All taskforces' options will be presented to the full Commission at their meeting on June 22nd at the Expo and Conference Center in Fredericksburg.

Proposed Interagency Guidelines on CSA Foster Care Services

Public Comment May 18 through July 20

On May 18, 2007 the Department of Social Services, the Department of Mental Health, Mental Retardation and Substance Abuse Services and the Office of Comprehensive Services issued a memo and proposed interagency guidelines from the State Executive Council to stakeholders who were asked to distribute them broadly. Accordingly,

the Office of Child and Family Services has shared this information with individuals and groups on our distribution lists.

The State Executive Council seeks input from all stakeholders on these critically important issues during a 60-day public comment period. Some important points about this information:

1. The memorandum supersedes the March 27, 2007 memorandum entitled "Foster Care Prevention Policy for Children Funded through CSA." The Virginia Office of the Attorney General has provided additional legal clarifications. This memorandum provides clarification on state and federal laws related to the provision of specific foster care services.
2. The proposed interagency guidelines on the provision of foster care services mandated through CSA for "children in need of services" (CHINS) and their families when the children:
 - Remain in their homes and have been identified as needing services to prevent or eliminate the need for foster care placements; and
 - Have been placed outside of their homes through an agreement between the parents or guardians and the local department of social services (LDSS) or the public agency designated by the CPMT where legal custody remains with the parents or guardians.

Parents or guardians do not have to relinquish custody of their children in order to obtain necessary services.

Please encourage all stakeholders to comment on the proposed interagency guidelines during the 60 days of public comment. Public comments will be compiled and distributed to the SEC members for their review. Copies of actual comments will be available prior to and at the meeting for SEC members to review. Revised guidelines, taking into account public comments, will be presented to the State Executive Council for final action at its August 8, 2007 meeting. The final guidelines will

be disseminated statewide and effective no later than August 15, 2007.

Written comments must be received by the Office of Comprehensive Services for At Risk Youth and Families by 5:00 p.m. on July 20, 2007.

Other CSA/SLAT News

- Charlotte McNulty, Executive Director of the Harrisonburg-Rockingham Community Services Board has accepted the role of SLAT Chairperson for the upcoming year.
- A SLAT Task Group focusing on the CSA uniform assessment instrument has completed its work and recommended the use of the Child Assessment of Needs and Strengths (CANS) as the CSA uniform assessment instrument.

Comprehensive State Plan 2008-2014

Every two years DMHMRSAS updates its Comprehensive State Plan. Currently the plan for 2008-2014 is being developed. The Comprehensive State Plan is used to support the DMHMRSAS' budget requests each biennium and is a very thorough compendium of information about our system. We encourage you to review it and participate when public hearings are announced to your CSB/GHA.

At the same time DMHMRSAS is also required to submit a plan for mental health services in collaboration with the Virginia Mental Health Planning Council. Some information from the Comprehensive State Plan is repeated in the Mental Health Plan, along with information responsive to federal performance requirements for the state. Several standardized national outcome measures are provided by all states to SAMHSA.

Federation of Families

DMHMRSAS continues to fund the Virginia Federation of Families (VAFOF) through a contract supported by Community Mental Health Services Block Grant funds. We are in the process of exploring with VAFOF the possibility of integrating

their parent support activities and initiatives with other funding we provide for parent support and involvement in Virginia, including our work with the Association of Retarded Citizens (ARC). Other efforts are in process to involve more parents who have youth with substance abuse problems in the Virginia Federation of Families. Please let families know about VAFOF!

Contact Information for Virginia Federation of Families:

Vicki Hardy-Murrell, RN
Virginia Federation of Families
8660 Staples Mill Road
Richmond, VA 23228
vhardy-murrell@medhomeplus.org
(804) 264-8428
(877) 264-8366
On the web at <http://www.medhomeplus.org/>

Part-C Updates

Early Intervention Awareness Month

Governor Timothy Kaine has proclaimed May as Early Intervention Awareness Month in Virginia. The proclamation reads as follows:

“WHEREAS, Virginia's children are among our Commonwealth's most valuable, precious, and vulnerable citizens, and they require proper care and attention as soon as they are born and throughout their formative years; and

WHEREAS, some children are born with developmental delays and disabilities, and it is crucial that these children receive immediate intervention treatment upon diagnosis; and

WHEREAS, the Infant & Toddler Connection of Virginia may provide early intervention services for the more than 16,000 infants and toddlers with development delays and disabilities and their families throughout the Commonwealth; and

WHEREAS, partnerships between state agencies, physicians and other private care providers, and their families with children with disabilities help ensure the continuation of early intervention services that enhance development and promote

the health and well-being of Virginia's children and families; and

WHEREAS, it is important that Virginia's citizens know about early intervention services available to infants and toddlers born with developmental delays and disabilities so families may utilize every opportunity to provide for the health and well-being of their children;

NOW, THEREFORE, I Timothy M. Kaine, do hereby recognize May 2007 as EARLY INTERVENTION AWARENESS MONTH in the COMMONWEALTH OF VIRGINIA, and I call this observance to the attention of all our citizens.”

<http://www.infantva.org/documents/ovw-Recognition-2007Proclamation.pdf>.

Public Service Announcement by Governor Timothy M. Kaine

Governor Kaine recently recorded a public service announcement encouraging parents who have concerns about their child's development to call the Infant & Toddler Connection of Virginia which is the Commonwealth's Part C of the Individuals with Disabilities Education Act (IDEA) Early Intervention Program. This public service announcement can be heard on Virginia's radio stations. The text of the public service announcement reads:

“I believe that access to healthcare and early education is important to all Virginians-particularly our youngest citizens. Thousands of infants and toddlers in the Commonwealth are born with developmental delays. These children may need help with sitting, crawling, walking or talking. The Infant and Toddler Connection of Virginia is the Commonwealth's early intervention system. This program helps identify and work with families and their children who exhibit signs of developmental delays or disabilities. Children who show signs of delay can be helped, and the sooner they receive services the better their chances are of reaching their greatest potential. If you have concerns about your child, talk with your family physician or call the Infant and Toddler Connection of Virginia toll free at 1-800-234-1448. That's, 1-800-234-1448. Please call today.”

Child and Family Behavioral Health Policy and Planning Committee

The CFBHPP committee has been meeting monthly and their work has focused on the 2007 report for the General Assembly due June 30, 2007 in accordance with the budget language contained in the 2006 Appropriations Act. The committee updated its ten year strategic plan that outlined three priority areas: healthy, strong, resilient, stable families; equitable access to services without regard to racial/ethnic status, socioeconomic status, and geographic location; and children are provided with humane, least-restrictive and effective services that support healthy child development. The funding priorities for the biennium include:

- increase service capacity by funding twelve system of care projects
- increased MR waiver slots
- MR family support
- intermediate community based (mid-level) services,
- Part C early intervention services
- outpatient substance abuse service
- school based mental health services
- increase the size of the workforce by adding 6 child psychiatry and child psychology fellows and interns to work in underserved areas
- enhance workforce development by funding centers of excellence to lead the training of clinicians in telemedicine and other forms of education evidence-based, promising and best practices for children's behavioral health treatment across the Commonwealth
- expand funding for a statewide family education, information support network family support and
- infrastructure budget request for OCFS

Child and Family Advisory Committee

The Child and Family Advisory committee held their quarterly meeting in May. The committee is committed to recruiting additional family members that reflect the diversity of the families to respond the full round of needs of families and brainstormed

several strategies for engaging families. The committee is particularly interested in linking with the Virginia Federation of Families, Family Involvement Project, and Parent to Parent to work collaboratively toward the goal of increasing family involvement and assisting with offering different opportunities for families to participate. The committee proposed developing a description for membership such as asking individuals to identify areas of interest such as policy, sharing family stories, and to determine what activities would be of interest to families. The committee determined their first priority is to hold informal meetings at different times and locations with for family members prior to the next committee meeting so that family members can share their concerns. Sub-committee members will use the Strong Roots Conference (scheduled for July 2007) to engage families for strategies to increase family involvement on this committee.

The committee recommended the Department create a family page for the OCFS web site with links to Parent to Parent, Federation of Families and the Family Involvement Project. Staff will develop a mock-up for a family page for committee's review.

Early Childhood Initiative

Several projects are occurring under the Governor's Early Childhood Initiative to support numerous community coalitions and cross-agency and cross-sector partnerships and momentum. Toward that goal, the Virginia Early Childhood Foundation recently awarded grants to local communities to assist with building a strong system of high quality early childhood care and education programs for young children from birth to kindergarten, with the ultimate goal of helping children enter school ready to learn and succeed. In addition Virginia has been working with Smart Start National Technical Assistance center on one of their technical assistance grants to states for early childhood system development, and recently an application has been submitted to the National Professional Development Center on Inclusion (NPDCI) for Early Childhood Education to create a system of high quality, cross-agency professional development for early childhood personnel to support inclusion and enhance the quality of the

early childhood workforce. Another Early Childhood Initiative project is a group of home visiting agencies have been meeting monthly as a cross-agency initiative to examine opportunities to expand access to health care and other social services, minimize duplication of services, and increase efficient use of resources toward the goal of a seamless system of supports and services that will ensure positive outcomes for children, enhance their well being and school readiness and increase their success in life.

The Governor's Early Childhood Summit will be held Friday, June 1, 2007 at Virginia Commonwealth University, Commonwealth Ballroom, Richmond, VA.

Workforce Development

In April, the Department issued a Request for Applications to Virginia's institutions of higher education to establish child psychiatry and child psychology fellows and internships to support workforce development in underserved areas of the Commonwealth. The applications were due May 1st. Prior to issuing the RFA, a pre-proposal conference was held and a tele-conference specifically to respond to questions from the applicants. A review panel has been formed and will review applications and make recommendations to the Department. Award announcements will be made sometime in late May and start-up for the internships and fellowships is anticipated to be July 1, 2007. Critical to the success of this program is creating and maintaining opportunities to increase the fellows and interns experience with public and rural psychiatry and psychology. Also critical is strengthening the relationships with regional community services boards and the state's children's psychiatric and residential facilities in underserved areas toward the goal of educating candidates on the opportunities, special needs, and challenges facing the clinician working in the public mental health care system.

Substance Exposed Newborn Workgroup

The Substance Exposed Newborn Workgroup held a Round Table Discussion Group on May 11th. The workgroup wished to learn more about effective strategies for building support and advocacy efforts

to support services for pregnant substance using women and their newborns and invited a variety of stakeholders who either provide and/or have benefited themselves from advocacy efforts. Attendees included representatives from the Federation of Families, March of Dimes, CHIP of Virginia, the Ark, and the Virginia Poverty Law Center. Not only did stakeholders offer a wealth of advice, they were eager to explore how they might support the Workgroup's efforts and encouraged the group to be pro-active in seeking support for services. While the group addressed the importance of working to increase funding for services for this population; they also stressed the importance of educating legislators regarding addiction, encouraging them to support positive measures for these women and to avert punitive legislation. A follow-up meeting was scheduled for August 20th. Commonwealth Partnership

The *Commonwealth Partnership for Women and Children Affected by Substance Use* held their spring meeting Thursday May 24th in Virginia Beach. Debra Jefferson discussed Central CSB's efforts to develop services for substance using pregnant and "at-risk" women modeled after DMHMRSAS's Project LINK initiative. The May 24th featured a panel presentation by consumers in recovery who will share their experiences with community and peer support groups. For more information regarding the Partnership or it's meetings contact Carolyn Seaman at (804) 819-4184 or Dawn Farrell-Moore (804) 819-4185.

Project LINK

The Coordinators from the 8 Project LINK sites meet every other month with one another to discuss program issues and concerns; however, given the logistics, it is difficult to include other LINK staffing in these meetings. Last year, the Coordinators wanted to bring staff from all 8 sites so that they could have the opportunity to network and learn from one another. An All-Staff LINK meeting was held in January 2006 and was such a success that the Coordinators elected to repeat it at least once a year. This year's "All Staff" Project LINK meeting was held April 4th in Charlottesville; 25 staff from 6 of the sites were able to attend. Staff identified what they saw to be the strengths

and weaknesses of the services they offer and areas they would like to develop. Project LINK staff were especially interested in learning more about evidenced based practices (EBP) and which ones are suited to the population they serve. Although some EBPs, i.e. motivational interviewing, certain parenting and trauma programs, have been used with pregnant substance using women, no EBPs have been specifically identified for this population.

Project TREAT

2007 Joint Meeting on Adolescent Treatment Effectiveness

The Department of Mental Health, Mental Retardation and Substance Abuse Services was well represented at the 2007 Joint Meeting on Adolescent Treatment Effectiveness (JMATE) held in Washington DC on April 25-27. Shirley Ricks, Director of OCFS, Ken Batten, Director of OSAS, Martha Kurgans, Project TREAT Director, Malcolm King, Project TREAT Coordinator, Susan Pauley, Project TREAT Training Coordinator with Mid-ATTC, and Marc Goldberg, Evaluation Specialist with OSAS had many opportunities to learn from national presenters and to network with other state providers, researchers, families, youth, community leaders and policy makers. This year's theme was "Joining with Families, Youth, and Communities To Improve Adolescent Alcohol and Other Drug Treatment and Recovery." Malcolm King was a presenter on a panel discussion entitled "Collaborations and Partnerships To Achieve Optimum Service Delivery in Adolescent Substance Abuse Treatment" which focused on the utilization of family and community in the adolescent substance abuse treatment process and strategies for maintaining engagement of these critical components.

CSB SURVEY

Project TREAT is getting ready to launch a survey of youth services in the Community Service Boards to determine what substance abuse or co-occurring treatment services area available for adolescents and how these services are delivered. We extend

our gratitude to Jason Lowe and Marc Goldberg for helping Project TREAT staff develop on line capability through Survey Monkey.

The information received from this survey will assist OCFS and the Project TREAT staff in addressing the needs of the CSB workforce and their service delivery capabilities through development and implementation of training resources as well as development of adolescent specific curriculums for staff providing services for adolescents with substance abuse and co-occurring disorders.

Technical Assistance and Training for Community Services Boards

The first cycle of opportunity to request technical assistance from Project TREAT in the selection of and skill based training in an evidence based practice for services for adolescents with substance use or co-occurring disorders has been successful. Requests were received from Virginia Beach, Piedmont, Chesterfield, Alexandria, Henrico, Eastern Shore, Central Virginia, Blue Ridge, New River Valley and Richmond Behavioral Health Authority. Central Virginia, Blue Ridge and New River submitted as a team endeavor of neighboring boards and will provide us with learning about how that approach can work.

The TREAT grant allows for a second round of requests from Boards or facilities that serve adolescents. Applications can be submitted between June 1 and August 31. For more information or for another copy of the Request for Assistance, please contact Susan Pauley or Malcolm King.

Training for Supervisors

In collaboration with the Mid-Atlantic ATTC and the Central East ATTC, Project TREAT contracted with Tom Durham to provide free training for CSB and facility supervisors and managers of youth substance use and co-occurring services. Mr. Durham is a nationally recognized expert in clinical supervision and one of the authors of the newly

released TAP 21-A on clinical supervision in the substance abuse field.

This training includes a special emphasis on supervision of evidence-based practices. It was held in Williamsburg on May 15-17 and will be held in Roanoke on May 30-31 and in Charlottesville on June 27 and 28. For more information, please contact Susan Pauley at 804-692-1645. To register, please contact Stella Stith at 804-371-7999.

Highlighting Models for Youth Services

The Mid-Atlantic ATTC will create a space on their website to feature evidence based practices for adolescents. A specific model will be highlighted for a number of weeks with information provided by one of the developers of or an expert in that model. A unique opportunity will provide visitors to the site to submit questions about the model to the expert, which will be answered on the site for all to benefit from. When a new model is introduced, all the information from the previous models will be archived and available to visitors to the site. To be informed of the official “kick-off” date of this feature or to be added to the Mid-Atlantic ATTC list serve for adolescents, contact Susan Pauley at 804-828-0318.

Mental Health Services in Juvenile Detention Centers Demonstration Projects

Beginning next state fiscal year every detention center in the Commonwealth will have funding for mental health services to be performed in every detention center through the local CSB. Those centers are:

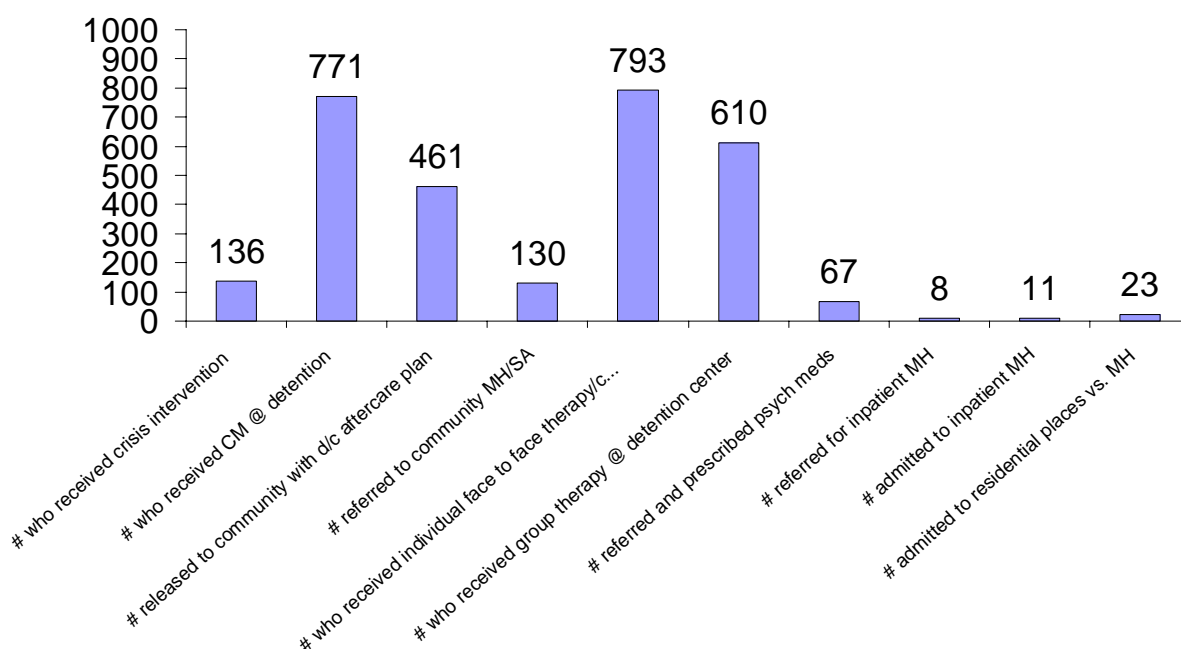
- Henrico CSB/ James River Juvenile Detention Home- JR long-term facility
- Fairfax CSB/ Fairfax County Juvenile Detention Center
- Loudoun CSB/ Loudoun Juvenile Detention Home
- NWCSB/ Northwestern Juvenile Detention Home
- PWCSB/ Prince William Juvenile Detention Home
- VA Beach CSB/ VA Beach Juvenile Detention Center
- District 19 CSB/ Crater Juvenile Detention
- Rappahannock CSB/ Rappahannock Juvenile Detention Center

Summary Data for Detention Center Projects (3rd Quarter, State Fiscal Year 2007)

Admitted to detention facilities during reporting period	1,819
Received mental health screening and assessment at detention intake	1,549
Average length of stay in detention center	48 Days
Returned to detention center after discharge over a 6 month period	110

85%

Services Received



Systems of Care Demonstration Projects

Systems of care demonstration project are continuing to provide an array of services to children and adolescents throughout the Commonwealth. These systems of care demonstration projects were funded in July 2005 to further the implementation of a system of care philosophy throughout the Commonwealth of Virginia; resulting in an increase in community based services for youth with serious emotional disturbance who are at risk for residential placements, and to create a framework for reporting valuable outcome data to measure

service quality that will inform future funding and program planning decisions.

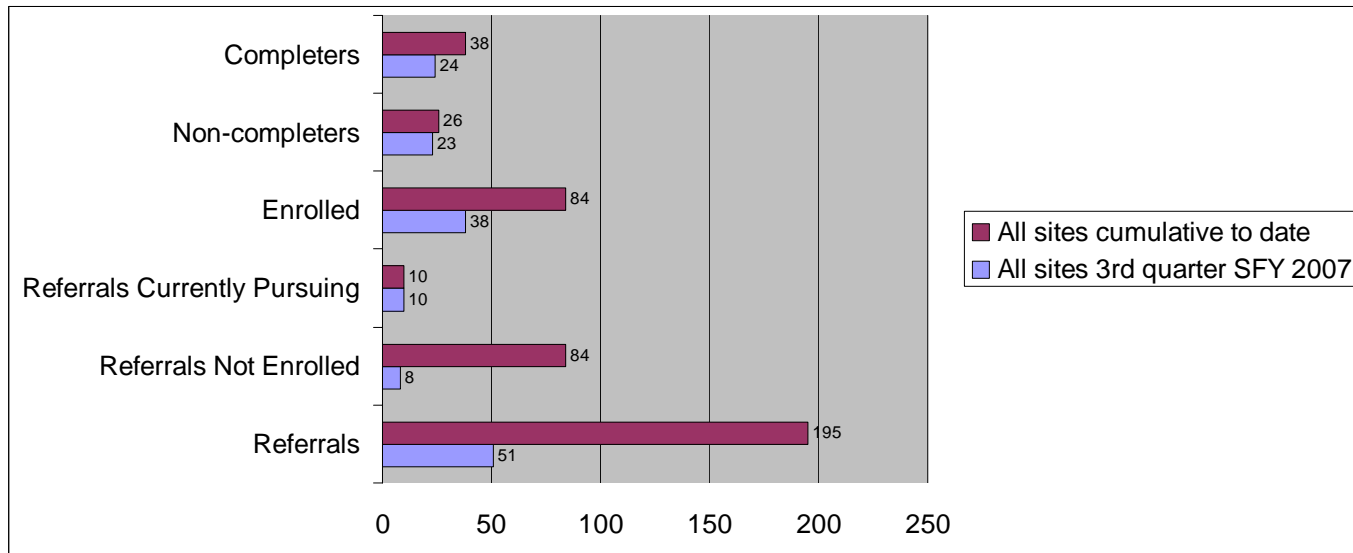
Services provided by these projects:

- Functional Family Therapy (Alexandria, Cumberland Mountain and Planning District One)
- Multi Systemic Therapy (Richmond)
- Alternative Day Support Services (Cumberland Mountain)
- Crisis Response Services (Planning District One)
- Psychiatric Services (Planning District One)

Service Provision Data for Evidence Based Practices (3rd Quarter, Sate Fiscal Year 2007)

	Referrals	Enrolled	Completers
PD 1 3rd quarter SFY 2007	26	19	10
PD 1 cumulative to date	86	33	13

<i>RBHA 3rd quarter SFY 2007</i>	10	7	10
RBHA cumulative to date	29	30	20
<i>Cumberland Mountain 3rd quarter SFY 2007</i>	15	12	5
Cumberland Mountain cumulative to date	20	21	5
<i>Alexandria 3rd quarter SFY 2007</i>	0	0	0
Alexandria cumulative to date	0	0	0
<i>All sites 3rd quarter SFY 2007</i>	51	38	24
All sites cumulative to date	195	84	38



Referrals are any child with contact information provided to the site for possible enrollment into the project. Referrals not enrolled are children who, for a variety of reasons, were not enrolled into the project. Referred and currently pursued are children who are eligible for the project and project staff are working to get them enrolled. Enrolled are children currently enrolled and receiving services in the project. Non-completer has dropped out or was prematurely discharged after enrollment. Completer: is a child who the treatment team, the consumer and their family have agreed to end services based on achieving desired clinical outcomes.

Training Activities and Conferences

VACSB

OCFS coordinated a Child and Family track at the recent VACSB conference *High Hurdle Training for a Transformed System* in Portsmouth May 1-4 focusing on co-occurring disorders and family-driven services. John Lyons presented at the Pre-conference Institute on *Trauma Sensitive Systems for Youth: Coping with Childhood Trauma and Overcoming How Substance Use Disorders Contribute to Childhood Experiences*. The Child and Family presentations at the conference itself included *Designing Children's Services that are Family Driven: Families and Professionals in Partnership* Vicky Hardy Murrell and Carol Olbrochta; *Implementing Evidenced Based Practices for Children with Co-occurring Disorders*, Dean Fixen; and *Treating Adolescents with Co-Occurring Disorders: Moving Recovery Through Evidence Based Practices*, Randy Muck. Feedback from VACSB indicated that the children's workshops were spectacular and the evaluations were the highest grades and comments

Regional Perinatal Council

Martha Kurgans presented on *Women and Substance Abuse* at the Blue Ridge Regional Perinatal Council's one-day conference *Substance Abuse: A Perinatal Challenge* held in Dublin, Virginia on May 17th and made a similar presentation at the Eastern Virginia Perinatal Council's meeting May 22. These presentations included an overview of the special issues and treatment needs pregnant and parenting substance using women face as well as a discussion of Virginia's perinatal legislation.

Virginia Summer Institute for Addiction Studies

The 2007 Virginia Summer Institute for Addiction Studies (VSIAS) will include a Women's Track and an Adolescent Track. To ensure that women's services providers at the CSBs are able to attend, DMHMRSAS offered at least one Women's scholarship to every CSBs. It is anticipated that these scholarships will enable approximately 75 women's services staff members to attend for

either the full week or a portion of the week. Speakers and topics for the Women's Track include: *Prescription Drug Abuse in Women: Two Generations at Risk*, Martha J. Wunsch, M.D.; *Addiction and Its Effects During Pregnancy* Gary D. Helmbrecht, M.D., FACOG *Women in The Work Force*, Carol Currier, M.D., FASAM; *Overview of Motivational Interviewing with Focus on Women's Services Providers*, Karen Ingersoll, Ph.D.; *Sex/Gender Matters in Drug Abuse*, Cora Lee Wetherington, Ph.D.; *The Role of Race/Ethnicity and Gender in Understanding Drug Abuse in Women of Color*, Kathy Sanders-Phillips, Ph.D.; *Ripples: How Parental Substance Abuse Affects Children and Families*, Naomi Weinstein, MPH; *Contingency Management and Client Reinforcement: Techniques for Engagement and Treatment Compliance in Substance Abuse Treatment* Michelle Tuten, M.S.W., LCSW-C; *Trauma Informed and Trauma Specific Treatment for Women with Substance Abuse and/Co-occurring Disorders*, Norma Finkelstein, Ph.D. and Laurie Markoff Ph.D.

VSIAS will be held at the College of William and Mary in Williamsburg July 16 – 21; registration for the Institute is open through July 1. To learn more, or to register for VSIAS go to www.vsiass.org.

Joint DMHMRSAS-Commission on Youth Conference

Please make note of the save-the-date information below on page 12. We are excited about the conference and are sure that you will find the agenda very interesting and helpful. The conference is promoting the use of evidence-based practices within community systems of care. The Department has provided funding from the Community Mental Health Services Block Grant to support this conference and has contracted with the Virginia Tech Center for Continuing and Professional Education for logistical support. The Commission on Youth, and other public and private agencies will also contribute financial support to the conference. Conference information and registration will be available later through a Virginia Tech sponsored website.



VIRGINIA DEPARTMENT of MENTAL HEALTH,
MENTAL RETARDATION and SUBSTANCE ABUSE SERVICES



VIRGINIA COMMISSION ON YOUTH

MARK YOUR CALENDAR – SEPT. 16-18, 2007

SYSTEMS OF CARE & EVIDENCE-BASED PRACTICES

Tools that work for youth and families

The Commission on Youth and the Department of Mental Health, Mental Retardation, and Substance Abuse Services are partnering to convene a statewide conference to educate behavioral health and human services professionals, families, caregivers, and youth on Systems of Care and how to utilize evidence-based practices for youth with behavioral health disorders within a System of Care.

Registration information will be forthcoming in the late Spring/Early Summer. In the meantime, please e-mail coymail@leg.state.va.us for available information.

The Hotel Roanoke and Conference Center | Roanoke, VA



This Update is also available at <http://www.dmhmrzas.virginia.gov/CFS-default.htm>

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